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transmitted to the USPTO (371) 273-2885, on the date indicated below. Siemens Corporation Intellectual Property Department 170 Wood Avenue South Iselin, NJ 08830 Raquel Wes rs: 2008 June D. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/694,098 10/27/2003 Gerald A. Raitzer 2003P14310US 3106 TITLE OF INVENTION: ARTIFACT REDUCTION FOR VOLUME ACQUISITION APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE **TOTAL FEE(S) DUE** DATE DUE nonprovisional \$1440 5300 50 \$1740 06/09/2008 **EXAMINER ART UNIT** CLASS-SUBCLASS ROZANSKI, MICHAEL T 3768 600-437000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the petent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is itsted, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Siemens Medical Solutions USA, Inc. Malvern, PA 4a. The following fee(s) are submitted: 4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) (2) Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19.2179 (caclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. 10694098 **Authorized Signature** Typed or printed name $\underline{\ \ Rosa\ \ S}$. Kim Registration No.

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